

JUROR # _____

UNITED STATES DISTRICT COURT
DISTRICT OF ARIZONA

In Re Bard IVC Filters Products Liability
Litigation

No. MD-15-02641-PHX-DGC

SHERR-UNA BOOKER, an individual,

Plaintiff,

v.

C.R. BARD, INC., a New Jersey
corporation and BARD PERIPHERAL
VASCULAR, an Arizona corporation,

Defendants.

**CONFIDENTIAL JUROR
QUESTIONNAIRE**

Only the Court and the attorneys will use the information that you give in response to this questionnaire. Your responses to this questionnaire will be kept confidential and all parties will be under orders to maintain the confidentiality of any information they learn in the course of reviewing these questionnaires.

Please answer each question below as completely and as accurately as you reasonably can. PLEASE COMPLETE YOUR ANSWERS IN PEN and print all answers legibly. If there is not enough space for you to complete an answer, please write the number of the question and complete your answer in the blanks provided on the last page. Please *do not* write on the back of any page.

If there is a question that you do not want to answer because of privacy concerns, then write in the blank by that question the word “privacy.” You may need to visit with the Judge and the attorneys out of the presence of the other potential jurors concerning that question.

If you simply cannot understand a question, then write in the blank by that question the words “do not understand.”

You are expected to sign your questionnaire, and your answers will have the effect of a statement given to the Court under oath. What is needed is your very best, honest effort to answer the questions contained in this questionnaire. Do not consult with any other person in answering the questions. After

completion of the questions, do not discuss this case with anyone, because you are a potential juror. Return the completed questionnaire to the Court. Brief but clear answers will allow us to review your background before you report to the courtroom and should help speed the selection process. Thank you for your cooperation.

The sole purpose of the questionnaire is to encourage your full expression and candor so that the parties will have a meaningful opportunity to select a fair and impartial jury to try the issues of the case. Your full cooperation is of vital importance. Thank you for your assistance.

Honorable
United States District Judge

1. Full Name (first) (middle) (last) : _____ Age: _____
2. Do you have any limitations in your ability to read or understand oral or written testimony in English? ☐ YES ☐ NO
If yes, please explain: _____
3. Please check one: ☐ MALE ☐ FEMALE
4. Place of birth: _____
5. What is your racial/ethnic background?
☐ White/Caucasian ☐ Black/African-American
☐ Hispanic/Latino ☐ American Indian or Native American
☐ Asian or South Asian ☐ Other (please specify)
6. In what city and county do you currently live? _____
7. Length of time at current address: _____
a) If you have lived less than five years at your current address, indicate other places you have lived. _____
8. Your current marital status:
☐ Married, ____ years ☐ Partnered, ____ years
☐ Never married ☐ Separated, ____ years
☐ Divorced, ____ years ☐ Widowed, ____ years
9. Your highest level of education completed:
☐ Less than high school
☐ High school graduate
☐ Some college: (Major: _____)
☐ Technical or vocational school: (Type: _____)
☐ College graduate: (Major: _____)
☐ Post graduate degree: (Major: _____)
10. Educational background of your spouse or significant other, including any degrees or certificates earned: _____
11. Your current employment status (check all that apply):
☐ Employed full-time ☐ Employed part-time
☐ Business owner ☐ Homemaker
☐ Self-employed ☐ Unemployed
☐ Retired in ____ (year) ☐ Full-time student
☐ Disabled, do not work ☐ Work more than one job
☐ Laid off ☐ Do not work outside the home

12. Please answer for your current job or, if unemployed, for your last job:
a) Employer: _____
b) How long: _____
c) Position and job duties: _____
13. Do you currently supervise others at work or have you in prior jobs?
☐ YES (How many? _____)
☐ NO
If yes, please describe: _____

14. Please list your previous employers and jobs for the past 10 years:

15. Have you ever owned and/or managed your own business? ☐ YES ☐ NO
16. Spouse or significant other's name, occupation, job title and employer (If he/she is unemployed or retired, please list last job.): _____

17. List any hobbies and special interests that you have: _____

18. Do you do any volunteer work (professional, community, social clubs or organizations)?
☐ YES ☐ NO.
If yes, please describe: _____

19. Do you serve in any leadership role at work or in any professional or community groups or organizations? ☐ YES ☐ NO
If yes, please describe: _____
20. Which of the following words or phrases would you use to describe yourself? Circle all that apply.
- | | | | | |
|---------------|-------------|-------------|-----------|---------------|
| Analytical | Assertive | Athletic | Careful | Cautious |
| Compassionate | Smart | Creative | Decisive | Detailed |
| Determined | Emotional | Frugal | Generous | Snap-Decision |
| Skeptical | Leader | Logical | Quiet | Sensitive |
| Shy | Open-Minded | Opinionated | Outspoken | Religious |
| Follower | Team Player | | | |
21. List the names, ages, occupations of your children, step-children, and grandchildren: _____

22. If employed, list children's occupations and employers:

23. Regarding your residence, check all that apply.

| | |
|--|---|
| <input type="checkbox"/> House, townhome | <input type="checkbox"/> Rent |
| <input type="checkbox"/> Condominium | <input type="checkbox"/> Own |
| <input type="checkbox"/> Apartment | <input type="checkbox"/> Live with others and do not pay rent |

24. Prior military service? If so, please specify branch, rank, date, years served, and type of discharge:

25. Are you or anyone in your family in any of the professions below either now or in the past? Circle all that apply.

| | | | | |
|-------------------------|------------------------|-----------|-------------|-----------------|
| Accounting | Business | Finance | Law/Legal | Government |
| Engineering | Chemistry | Insurance | Psychology | Social Services |
| Medicine/ Healthcare | Product Development | FDA | Advertising | R&D |

If yes, please state the relationship and the type of legal profession: _____

26. What are your main source(s) of news?

☐ Television (Which news channel(s)? _____)
☐ Radio (Which news station(s)? _____)
☐ Newspaper (Which newspaper(s)? _____)
☐ Magazine (Which magazine(s)? _____)
☐ Internet
☐ Family/Friends
☐ I don't follow the news

27. Do you or your spouse or partner have bumper stickers on your car? ☐ YES ☐ NO

If yes, what do they say? _____

28. Do you regularly use social networking sites on the internet (e.g., Facebook, Twitter, etc.)?

☐ YES ☐ NO

29. Do you currently serve as a caretaker for someone who is ill or disabled? ☐ YES ☐ NO

If yes, please explain: _____

30. Please list 3 people you admire the most:

a. _____
 b. _____
 c. _____

31. Please list 3 people you admire the least:
- _____
 - _____
 - _____
32. Have you ever served on a jury before? ☐ YES ☐ NO
- How many times? _____
 - Where did you serve? _____
 - What types of case(s)? _____
 - Were you ever the jury foreperson? _____
 - Was your jury service a positive or negative experience? _____
33. Have you, your relatives or anyone close to you ever:
- | Yourself | Someone
Close | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | a. Sued someone else |
| <input type="checkbox"/> | <input type="checkbox"/> | b. Been sued by someone else |
| <input type="checkbox"/> | <input type="checkbox"/> | c. Been involved in a lawsuit of any kind either as a plaintiff, or defendant, or a witness |
| <input type="checkbox"/> | <input type="checkbox"/> | d. Suffered from any type of permanent injury, disease or disability |
| <input type="checkbox"/> | <input type="checkbox"/> | e. Been unable to work due to a permanent injury, disease or disability |
| <input type="checkbox"/> | <input type="checkbox"/> | f. Been involved in an accident that resulted in loss or injury |
| <input type="checkbox"/> | <input type="checkbox"/> | g. Ever filed a legal claim or complaint of any sort against an individual or entity |
| <input type="checkbox"/> | <input type="checkbox"/> | h. Made a personal injury claim or filed for worker's compensation |

If you answered yes to any of the above, please explain: _____

34. For the following, please indicate how you feel about them. Use a scale from 1 to 7, where 1 is "feel extremely negative" and 7 is "feel extremely positive" and you may use any number in between as well.

Personal injury lawyers

Extremely Negative 1 2 3 4 5 6 7 Extremely Positive

Medical Device Manufacturers

Extremely Negative 1 2 3 4 5 6 7 Extremely Positive

Corporations

Extremely Negative 1 2 3 4 5 6 7 Extremely Positive

35. This case involves Inferior Vena Cava (“IVC”) filters that are implanted into a patient’s vein to prevent blood clots from reaching the lungs or heart. Is there anything about this subject matter that causes you to believe that you could not consider the evidence fairly, impartially, and according to the jury’s instructions? ☐ YES ☐ NO

If yes, please explain: _____

36. Have you read or heard anything about lawsuits involving any medical devices, including IVC filters? ☐ YES ☐ NO

If yes, please explain what you have read or heard: _____

37. Have you read or heard anything (in the media, from family or friends) about C. R. Bard or Bard Peripheral Vascular, medical device manufacturers? ☐ YES ☐ NO

If yes, please explain what you have read or heard and please identify any media report you can recall: _____

38. Have you read or heard anything (in the media, from family or friends) about IVC filters? ☐ YES ☐ NO

If yes, please explain what you have heard or read: _____

39. If you have heard or read something about lawsuits involving any medical devices, including IVC filters, would what you have heard or read make it difficult for you to serve as a fair and impartial juror in this case? If yes, please explain:

40. Is there any anything else that you think might affect your ability to be fair and impartial to both sides of a product defect case against a medical device manufacturer? ☐ YES ☐ NO

If yes, please explain: _____

41. Have you, your relatives or anyone close to you ever worked for C. R. Bard or Bard Peripheral Vascular? ☐ YES ☐ NO

If yes, please describe who, the job title and dates of employment: _____

42. Have you, your relatives or anyone close to you ever worked for a company that manufactured or sold IVC filters? ☐ YES ☐ NO

If yes, please describe who, the name of the company, the job title and dates of employment: _____

43. Have you, your relatives or anyone close to you ever worked for a medical device company? ☐ YES ☐ NO

If yes, please identify the person(s), the work performed and the dates of employment: _____

44. Have you, your relatives or anyone close to you ever worked for a health care facility (*e.g.*, hospital, physician's office, critical care center or medical clinic)? ☐ YES ☐ NO

If yes, please identify the person(s), the work performed and the dates of employment: _____

45. Do you have any strong feelings positive or negative about people that file lawsuits? If yes, please describe: _____

46. Have you, your relatives or anyone close to you ever been diagnosed with any of the following? Check all that apply.

☐ Blood Clots

☐ Pulmonary Embolism (PE)

☐ Deep Venous Thrombosis (DVT)

If you have checked any of the above, please identify the person(s), and describe the complication and outcome: _____

47. Have you, your relatives or anyone close to you ever been prescribed or taken anti-coagulation medication (“blood thinners”), such as Coumadin, Warfarin, Xarelto or Lovenox? ☐ YES ☐ NO

If yes, please identify the person(s), the name of the medication(s) and outcome:

48. Have you, your relatives or anyone you personally know ever had an IVC filter or medical device implanted? ☐ YES ☐ NO

If yes please identify:

The person(s): _____

Type of medical device: _____

Manufacturer of medical device: _____

Any complications experienced with device: _____

49. Do you know anyone who had a negative experience or suffered injuries from an IVC filter?

☐ YES ☐ NO

If yes, please explain: _____

50. Do you know anyone who had a negative experience or suffered injuries from any other medical device or prescription drug? ☐ YES ☐ NO

If yes, please explain: _____

51. If you, or a family member or someone close to you, had a negative experience with any type of medical device or prescription drug, would that experience make it difficult for you to serve as a fair and impartial juror in this case? If yes, please explain: _____

52. Do you or someone in your immediate family have experience in the following? (Check all that apply):

☐ Drug or medical device company

☐ Medicine/medical field

☐ State/federal regulatory agencies, *e.g.* FDA

☐ Law/legal system

☐ Insurance industry

☐ Education/teaching

☐ Sales or marketing

☐ Engineering

☐ Product design or testing

☐ Quality Assurance/Quality Control

☐ Health Hazard Evaluations (HHE)

☐ Root Cause Analysis

☐ 510k

☐ PMA

☐ MAUDE

☐ Medical Device Reports (MDR)

If you have checked any of the above, please explain: _____

53. Compared to five years ago, do you have an unusual financial hardship or other serious problem that would prevent you from serving as a juror in this case? ☐ YES ☐ NO

If yes, briefly explain the hardship: _____

54. From what you have heard or read, do you think in recent years, the number of injury lawsuits filed has generally been:

☐ Too high
☐ About right
☐ Too low

55. From what you have heard or read, do you think money damages from recent lawsuits have generally been:

☐ Too high
☐ About right
☐ Too low

56. Do you support legislative reforms to place caps or limits on the amount of money juries can award? ☐ YES ☐ NO

If yes, please explain: _____

57. If you are chosen to be a juror, and while jury selection is in process, you are not permitted to read or listen to any media or Internet coverage of this case and related subjects while the case is pending. Will you be able to follow these restrictions in light of the fact that this trial will be lengthy? ☐ YES ☐ NO

If no, please explain: _____

58. If you are chosen to be a juror, and while jury selection is in process, the Court will instruct you that you will not be able to blog, tweet, post on Facebook or other social networks, talk about, or otherwise communicate anything about this case while the case is pending. Is there any reason why you cannot follow this instruction? ☐ YES ☐ NO

If yes, please explain: _____

59. Do you have any ethical, religious, moral, political, philosophical or other beliefs that would prevent you from applying the law to the evidence of the case? ☐ YES ☐ NO

If yes, please explain: _____

60. Do you know of any reason you could not be a fair, impartial, unbiased juror in this lawsuit? ☐ YES ☐ NO

If yes, please explain: _____

61. Do you have any serious medical condition or health problem that might make it difficult or affect your ability to serve as a juror in this case? ☐ YES ☐ NO

If yes, please explain: _____

62. Is there any reason you cannot serve on this jury if the trial lasts three weeks? ☐ YES ☐ NO

If yes, please explain: _____

63. The attorneys may need to ask you follow-up questions. Are there any questions you would prefer to discuss in private? ☐ YES ☐ NO

If yes, please indicate the question numbers here: _____

64. Is there anything else that you would like the Court or the attorneys to know? ☐ YES ☐ NO

If yes, please explain: _____

65. On the last page of this Questionnaire, there is list of people who may be involved in the case. Please circle those you know, have heard, or worked with for/with.

SPACE FOR ADDITIONAL RESPONSES. Please include the number of the question for which you are supplying additional information.

AFFIRMATION

I, _____ hereby declare under penalty of perjury that the foregoing answers set forth in this Jury Questionnaire are true and correct to the best of my knowledge and belief. I have not discussed my answers with others or received assistance in completing the questionnaire. I have answered all of the above questions in this Jury Questionnaire myself.

Executed on this ____day of March, 2018.

Signature

Below is a list of people who may be involved in the case. Please circle those you know, have heard, or worked with for/with.